

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO/

10/588283.

FILING DATE

25 FEB 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/		/		
3	/		/			
4		/		/		
5		4		4		
6	/		/			
7		/		/		
8		2		2		
9		0		2		
10		0		2		
11		0		2		
12	/		/			
13		/		/		
14		2		/		
15		0		/		
16		0		/		
17	/		/			
18		/		/		
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50						
TOTAL IND.	5		3			
TOTAL DEP.	20		19			
TOTAL CLAIMS	25		22			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL DEP.						
TOTAL CLAIMS						